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OLIFF & BERRIDGE, PLC P.O. BOX 19928 **ALEXANDRIA, VA 22320** 



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(	Depositor's name)
-	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/657,150	09/09/2003	Susumu Chida	117068	1894

TITLE OF INVENTION: TELEPHONE TERMINAL EQUIPMENT AND TERMINAL CONTROL PROGRAM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/12/2007
EXAM	IINER	ART UNIT	CLASS-SUBCLASS			
BUI, B	ING Q	2614 ·	379-212010	•		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>		<ul> <li>2. For printing on the patent front page, list</li> <li>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</li> <li>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ul>		era 2	Oliff & Berridge, PLC  2  3	
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	oe)		
PLEASE NOTE: Uni	less an assignee is ident	ified below, no assignee	data will appear on the particle of the partic	atent. If an assignee is id	entified below, the docu	iment has been filed for

substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Brother Kogyo Kabushiki Kaisha

Nagoya, Japan

Please check the appropriate assignee category or categories (will not b	e printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government
la. The following fee(s) are submitted:    Solution   Solution	4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Ck No. 194770 (\$1700.00)  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).
Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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07/13/2007 SZEWDIE2 00000019 10657150 July 12, 2007 01 FC:1501 1400.00 OP 50,559 Registration:No04 300.00 OP

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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